

Be smart. Choose the right plan for **YOU!** Not all health plans are the same.

### CONSIDER

- What ongoing care do I need – is it covered?
- What are my out-of-pocket costs under the plan?
  - Deductible ◦ Copayment ◦ Coinsurance
- What is the annual out-of-pocket maximum?

### BE AWARE

These are not the only questions you should ask – use this checklist to evaluate and compare important plan benefits and restrictions.

	PLAN A	PLAN B	PLAN C
Can I keep seeing my current doctor?			
Is my doctor in my plan's network?			
Do I need a referral to see a specialist (doctor with special training)?			
Can I see a doctor outside the plan network?			
Is there a specific hospital I must use?			
Do I need prior authorization for treatment?			
Are my current medicines covered (on formulary)?			
Are my drugs on a high \$ tier? How much will that cost?			
Is there a step therapy program, which may require a certain drug to be tried first, rather than a drug originally prescribed by my doctor?			
Does my plan have a copay accumulator adjustment program?			
Are there restrictions on the pharmacy I can use?			
What are the mental health and substance abuse benefits? Does my plan cover out-patient drug rehabilitation?			
Does my plan cover home health care?			
Does my plan cover durable medical equipment?			
Does my plan offer health education?			
<b>MONTHLY PREMIUM</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

## **COINSURANCE**

The money you have to pay for health services after you have paid the deductible.

## **COPAYMENT**

A fee you pay each time you see a doctor or fill a prescription.

## **COPAY ACCUMULATOR ADJUSTMENT PROGRAM**

When payments made from copay cards aren't counted toward your deductible.

## **DEDUCTIBLE**

The amount you must pay for health services before your insurance starts to pay.

## **DURABLE MEDICAL EQUIPMENT (DME)**

Examples are wheelchairs, hospital beds, canes, crutches, walkers, ventilators and oxygen.

## **FORMULARY**

A list of drugs covered by your health plan.

## **HEALTH EDUCATION**

Is done through programs and services dedicated to educating you on topics like staying fit, managing diseases, maintaining a healthy weight, eating healthy.

## **HIGH \$ TIER**

Even though a drug may be covered by your health plan, there are often several levels, or tiers, (1-6) that drugs may fall into, with each level having an increasing copay amount. For drugs on the highest tier, you may have to pay as much as 20-30% of the total cost. Some health plans may also use tiered copays for medical coverage as well.

## **OUT-OF-POCKET MAXIMUM**

The most you have to pay for health services. Once you have paid this amount, your insurance pays 100% of your health care costs.

## **PRIOR AUTHORIZATION**

Your health plan's approval process before you receive services. This process lets a provider know if the health plan will cover a needed service.

## **STEP THERAPY**

Requires "certain" drugs to be tried first, rather than the drug originally prescribed by your doctor.